



REQUEST FOR USE OF AN AIR CURTAIN OPEN PIT DESTRUCTOR

State Form 43688 (R4/11-02)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

Indiana Department of Environmental Management
Office of Air Quality - Air Compliance Branch
100 N. Senate Avenue
P.O. Box 6015
Indianapolis, IN 46206-6015
Phone: (317) 233-5672 or
1-800-451-6027 (Indiana Residents Only)
<http://www.IN.gov/idem/air/compliance>

- NOTE**
- This is an application for open burning approval with an air curtain open pit destructor to comply with 326 IAC 4-1. Complete and return this application to the Office of Air Quality address provided in the upper right hand side of the form or fax to 317-233-6865. In case of questions someone may be reached at 317-233-5672 or (in Indiana) 1-800-451-6027 press 0, and ask for extension 3-5672.
 - You can fill out this form electronically, using your mouse and keyboard. Simply click inside of the number one (1. Name) field to begin, and advance to the next fields using the "tab" key on your keyboard, or by clicking in the field with your mouse.

FOR OFFICE USE ONLY

VARIANCE ID NUMBER

ASSIGNED TO

NOTE

? Please complete the following and return to the Office of Air Quality, Indiana Department of Environmental Management, P.O. Box 6015, Indianapolis, Indiana 46206-6015, 60 days prior to the proposed burning date. A list of names & addresses of all parties owning or renting property within 500 feet of the proposed burn pit(s) and of any other interested persons should accompany this application using State Form 49635 "Identification of Potentially Affected Persons".

PART A: PERSON OR CONTRACTOR OPERATING AIR CURTAIN

1. Name:	2. Organization Name:	
3. Address:		
4. City:	5. State:	6. Zip:
7. Daytime Telephone: () -	8. Fax Number: () -	

PART B: PROJECT LOCATION

9. Site address (Street or 911 address or directions from known roads/streets/intersection/which side of road):	
10. City:	11. County:
12. Fire department having jurisdiction (include address)	

PART C: MATERIAL TO BE BURNED

13. Indicate the type of material to be burned: <input type="checkbox"/> Tree waste <input type="checkbox"/> Other (specify):		<input type="checkbox"/> Wood demolition waste	<input type="checkbox"/> Wood construction waste
14. If clearing project, state number of acres:	15. Projected total cubic feet:		
16. If structure, state type of structure:			

PART D: PROJECTED BURNING TIME

17. Burning is projected to take place between / / and / /	18. Total number hours of burning time
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PART E: AIR CURTAIN

19. Manufacturer name:	20. Model:
21. Burning capacity (tons/hour):	22. Rated capacity (feet per minute) of blower velocity of air at nozzle:
23. Air flow (cubic feet/minute/foot of length of nozzle):	24. Static pressure in inches of water column:
25. Loading method:	

NOTE

- The width of the pit shall not exceed ten feet, the length of the pit shall not exceed beyond the length of the nozzle action, and depth of the pit is to be sufficient to allow all burning to take place below the curtain of air. Unless otherwise stated, only clean wood waste may be burned using an air curtain destructor.

PART F: SIGNATURE

I hereby certify that the information above is accurate to the best of my knowledge.

Signature

Date: (mm/dd/year)

Type or Print Name

Title

¹ Available from the IDEM Office of Air Quality or on the Internet at <http://www.in.gov/icpr/webfile/formsdiv/43635.pdf>